

niques of application and regimens for local skin care should have been presented.

This atlas is the most complete work available on the construction and revision of enterostomies. It is based on the extensive experience of its authors and it will serve as a useful guide for both the resident and the graduate surgeon.

ARTHUR L. GOLDING, M.D.

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CIBA FOUNDATION COLLOQUIA ON ENDOCRINOLOGY, Volume 16—Endocrinology of the Testis—Edited by G. E. W. Wolstenholme, O.B.E., M.A., F.R.C.P., F.I. Biol., and Maeve O'Connor. Little, Brown and Company, 34 Beacon St., Boston, Mass. (02106), 1967. 331 pages, \$12.50.

This is the sixteenth and final volume in the series of international colloquia on Endocrinology. With Dr. R. I. Dorfman of the Institute of Human Biology, Palo Alto, California, as chairman, twenty-six international authorities present and discuss the results of recent research dealing with the endocrinology of the testis.

Much of the material is somewhat esoteric for the practicing physician, dealing as it does with such matters as cytochemistry, steroid biosynthesis, and the testicular enzymes. On the other hand, it will be fascinating reading and important information to anyone interested in such phases of testicular function.

Many cryptic facts of interest to the clinician also can be picked from the well-edited discussions of the hormonal development and relationship of the testis and other generative organs, such as the fact that complete spermatogenesis and fertility are possible in the absence of Leydig Cells; that excellent sperm counts can be obtained in patients with infantile testes by the injection of human menopausal gonadotropins; that plasma testosterone levels are not significantly different in young and old men, probably due partly to falling metabolic clearance rates; that over two-thirds of the estrogen produced in men comes from the testes; and, that human chorionic gonadotropin and ACTH will retard the degeneration of an ischemic testis.

A new syndrome of primitive testicular hypogonadism of probable genetic etiology, called "mixed testicular dysgenesis," is described and will interest the practitioner.

EARL F. NATION, M.D.

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CLINICAL OBSTETRICS AND GYNECOLOGY—Volume 10, Number 2, June 1967—Trophoblastic Disease—Edited by Donald P. Goldstein, M.D., and Hazel Gore, M.B., B.S.; and Ovulation, Edited by Luigi Mastroianni, Jr., M.D. Published quarterly by Hoeber Medical Division, Harper & Row, Publishers, 49 East 33rd Street, New York, N.Y. (10016), about 1,200 pages per year. Subscription: \$18.00 per year.

This volume of Clinical Obstetrics and Gynecology presents symposia on trophoblastic diseases and ovulation. While the need for ovulation induction and the occurrence of trophoblastic disease are relatively infrequent in the experience of the specialist, they nevertheless occupy a position of particular interest in current obstetrical and gynecological thought. The articles of both symposia present the views of eminently qualified investigators and clinicians who have devoted their experience to each of these subjects.

The symposium on trophoblastic disease rightfully is dedicated to Doctors Arthur T. Hertig and Roy Hertz who have inspired investigation and elucidation in the field of the normal trophoblast and its tumors. This symposium consists of selected papers presented at the first New England Workshop on trophoblastic tumors held in

Boston, Massachusetts in February of 1966. The review is a dynamic and enlightening one reflecting the first ten years of experience in the era of chemotherapeutic management of trophoblastic disease. Primary emphasis is placed upon the diagnosis and management of these tumors. Clinicians will take especial interest in Dr. Lewis' paper which outlines time and dose regimens for the use of methotrexate, actinomycin D and chlorambucil. The safeguards in the use of these agents are carefully discussed. Doctors Goldstein and Reid in presenting the problems of molar pregnancy have brought to our attention a relatively new concept in the management of hydatidiform mole. They supply encouraging data to suggest the efficacy of prophylactic chemotherapy prior to the delivery of a molar gestation. Results of therapy imply a considerably decreased incidence of subsequent chorioadenoma destruens and choriocarcinoma. Other sections of this symposium deal with the important and sophisticated techniques of human chorionic gonadotropin assay and their utilization in the detection of and follow up of molar disease. The pathologist is rewarded in reviewing this symposium by reading the authoritative views of Doctors Gore and Hertig, who have devoted themselves to the histologic interpretation of trophoblastic disease. This section brings into sharp focus the importance of the differential diagnosis and the pitfalls encountered in the histologic delineation of these tumors.

Trophoblastic Disease is a short group of articles that succinctly portrays the current status of our knowledge regarding trophoblastic tumors. The articles are well written and while devoted only in part to the requirements of the clinician, effectively and definitively define the diagnosis, management and outcome of trophoblastic disease. Examination of this symposium is essential for every specialist in obstetrics and gynecology.

The section on ovulation is written by a no less impressive group of contributors. Major emphasis is placed on the induction of ovulation. Until recently the treatment of ovulatory failure was one of the major obstacles in the management of infertility. In this volume, the use of recently available clomiphene citrate and human pituitary preparations are presented. Dr. Goldfarb evaluates the current experience with clomiphene in the induction of ovulation. The actions and mode of administration of this drug are assessed. Unfortunately little attention has been given to the number of patients in whom ovulation is induced and more importantly, no notation has been made of the limited number of patients becoming pregnant under a clomiphene regimen. Dr. Gemzell summarizes the experience in Sweden with the use of human pituitary FSH and human chorionic gonadotropin for the induction of ovulation. His experience with these agents is particularly impressive. It is interesting to note that the number of pregnancies and babies produced by this means of ovulation induction is small in comparison with the great attention these drugs have received in the lay press. Other portions of this section on ovulation deal with the anatomy of ovulation, its endocrinology, detection and diagnosis. These reviews express no new information but in encyclopedic form document prior investigation in this area.

These symposia on trophoblastic diseases and ovulation are significant contributions. In this work these subjects which have received wide clinical and investigative interest receive current evaluation. The volume is to be highly recommended particularly to specialists in obstetrics and gynecology.

ROBERT G. GOOD, M.D.